

2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P09000014312

Entity Name: BASELINE MEDICAL SERVICES, INC.

Current Principal Place of Business:

760 S VOLUSIA AVE
200
ORANGE CITY, FL 32763

Current Mailing Address:

285 UPTOWN BLVD, # 409
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 26-4253696

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKER, FRANKLIN
285 UPTOWN BLVD, # 409
ALTAMONTE SPRINGS, FL 32701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	PARKER, FRANKLIN P	Name	PARKER, JOLIE A
Address	285 UPTOWN BLVD, # 409	Address	285 UPTOWN BLVD, # 409
City-State-Zip:	ALTAMONTE SPRINGS FL 32701	City-State-Zip:	ALTAMONTE SPRINGS FL 32701

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANKLIN PARKER

PRESIDENT

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date